STATE OF MAINE



COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station, Augusta, Maine 04333-0135 Office: 242 State Street, Augusta, Maine Tel: (207)287-4179

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STATEMENT OF SOURCES OF INCOME 1 M.R.S.A. §§ 1016-A et seq.

COVERING THE CALENDAR YEAR
JANUARY 1, 2006 THROUGH DECEMBER 31, 2006

FULL NAME: Mark Paul Sansus	Please check the appropriate box and fill in the District number.
MAILING ADDRESS: 34 Muiket Ar	
CITY: Ashura	Member of the Senate, District
ZIP CODE:	- -
PHONE NUMBER: 309-783-999/	Member of the House, District 20

GENERAL INSTRUCTIONS

1. Please file this statement with the Clerk of the House or the Secretary of the Senate by:

5:00 p.m. on February 15, 2007.

- The report covers you, your spouse, and your dependent children.
- 3. Report only specific sources of income. Dollar amounts need not be listed.
- 4. Campaign contributions duly recorded as required by law need not be reported in this statement.
- Attach additional sheets if needed. Label attachments with your name, address, and the date.
- 6. Please sign on Page 4.

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- 7. The completed statements will be posted as a 'pdf' on the Commission's website.
- 8. State law (1 M.R.S.A. § 1018) requires Legislators to file an updated statement with the Commission within 30 days of any change to the information relating to the preceding year. Additionally, the law (1 M.R.S.A. § 1016-B (2)) requires Legislators to make a supplementary statement to the Commission of any reportable liability within 30 days after it is incurred.

PLEASE REEP A COPY OF THIS STATEMENT FOR YOUR FILES.	
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Disclosure statements are made available to members of the public upon request.

Thank you for your cooperation.

PART I. INCOME DERIVED FROM EMPLOYMENT BY ANOTHER. Name each employer from whom you received compensation of \$1,000 or more. Specify also the principal type of economic activity of each employer.

4- 4			Principal Type of Economic	
Name of Employer	Address		Activity of Employer	
Mechanica Saving	s BANK POBOT	<u> 400 - Aubr</u>	in Banking	
1/501 201	Paciflan	of ME	m Banking - Telecon-	
	/ /			
Enter the name and addre		i list the major areas	lators who are self-employed.) of economic activity from which you c similar business entity, list the major are	
economic activity of that	entity.			
Name and Address of Business Entity	Major Areas of Economic A	Acti <u>vity</u>	Major Areas of Economic Activity (partnership, association or similar business of	
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Name each source of inc \$1,000, whichever is gre derived such income. If	ome derived from self-employn ater, and specify the principal t this form of disclosure is prohil	nent that represents ype of economic act bited by law, rule, o	more than 10% of your gross income or ivity of the entity or person from whom r an established code of professional et from whom the income was derived.	ijу
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PART IV. OTHER SOURCES OF INCOME. Name each source of income of \$1,000 or more not listed in Parts I, II, or III of this form. Do not include gifts. If none, so state.

Name of Source	Address	Kind of Income
None	• · · · · · · · · · · · · · · · · · · ·	
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RT V. DISCLOSURE OF REPO 00 or more that you received during list loans from a relative. If none, so	the reporting period, and list the major	names of creditors for any unsecured load or areas of economic activity of each creditor
•		Principal Type of Economic
Name of Creditor	Address of Creditor	Activity of Creditor
Vone		
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RT VI. DISCLOSURE OF GIFT	'S. Name the specific source of eac	h gift of more than \$300. Include gifts wi
RT VI. DISCLOSURE OF GIFT regate value of more than \$300 from	S. Name the specific source of eac a single source. If none, so state.	
RT VI. DISCLOSURE OF GIFT regate value of more than \$300 from	S. Name the specific source of eac a single source. If none, so state.	
RT VI. DISCLOSURE OF GIFT egate value of more than \$300 from	S. Name the specific source of each a single source. If none, so state. 3. 4. NORARIA. List the source of any	
RT VI. DISCLOSURE OF GIFT regate value of more than \$300 from	S. Name the specific source of each a single source. If none, so state. 3. 4. NORARIA. List the source of any	honoraria accepted for appearances or spe
RT VI. DISCLOSURE OF GIFT regate value of more than \$300 from Jean Jein Jenne RT VII. DISCLOSURE OF HORed to your official duties. If none, so	S. Name the specific source of eac a single source. If none, so state. 3. 4. NORARIA. List the source of any state. 3. 3.	honoraria accepted for appearances or spe
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RT VIII. REPRESENTATION B represented or assisted others for con	S. Name the specific source of each a single source. If none, so state. 3. 4. NORARIA. List the source of any postate. 3. 4. EFORE STATE AGENCIES. Idea impensation of any amount. If none, so	honoraria accepted for appearances or spec

PART IX. BUSINESS WITH STATE AGENCIES. Identify each executive branch agency to which you or a member of

your immediate fan	ally sold goods or services wi	ith a value in excess of \$	1,000 during the reporting period. If none, so state.
1. <u>Van</u> e		2	E HT THINK THICKES
PART X. INCOM	TE RECEIVED BY MEMB	ERS OF IMMEDIATI	E FAMILY.
child(ren) during th		nd of income represented	\$1,000 or more received by your spouse or dependent d. Do not include gifts. Indicate (S) beside sources of y dependent(s).
Type of Econor Representing Ea Income Re	ach Source of		Kind of Income
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1. (2) 1/653	Lagar T. Carricad	, ME	- Sistary
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3			
4			
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appears that a L Attorney Genera statement or has interest on every branch of the Le who willfully fai	egislator has willfully fi al. If the Commission do willfully filed a false sta question and shall be p egislature, and shall not	led a false statement etermines that a Leg atement, the Legisla precluded from votin attempt to influence ement is subject to a	crime. If the Commission concludes that it t, it shall refer its findings of fact to the sislator has willfully failed to file a required tor shall be presumed to have a conflict of g on any question in committee or in either the outcome of any question. A Legislator civil penalty not to exceed \$1,000, payable to 19)
- MJ	Signature		1/4/02 Date